2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000056508

Entity Name: ONE STOP MEDICAL EQUIPMENT, INC.

Current Principal Place of Business:

3600 S. STATE ROAD 7
STE. 351
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

3600 S. STATE ROAD 7
STE. 351
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 65-1119574 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ESCOBARA, SABRINA
12766 NW 11TH PLACE
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

ESCOBAR, SABRINA
3600 S. STATE ROAD 7
STE. 351
MIRAMAR, FL 33023 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SABRINA ESCOBAR 03/13/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ESCOBAR, SABRINA
Address: 3600 S. STATE ROAD 7, STE. 351
City-St-Zip: MIRAMAR, FL 33023

Title: VD ( ) Delete
Name: BARRIOS, OSNIEL
Address: 3600 S. STATE ROAD 7, STE. 351
City-St-Zip: MIRAMAR, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SABRINA ESCOBAR PD 03/13/2002
Electronic Signature of Signing Officer or Director Date